

Võrumaa Metsaühistu MTÜ vorumaa.metsauhistu.ee vorumaa@metsauhistu.ee Pikk 4 65604 Võru +372 522 9424

## MEMBERSHIP APPLICATION FORM FOR NATURAL PERSONS

NAME

PERSONAL ID CODE

POSTAL ADDRESS

PHONE

E-MAIL

FOREST AREA (IN HECTARES)

□ I hereby request to be accepted as a member of the Võrumaa Forest Association. I have reviewed the Association's articles of association, I am aware of my rights and obligations as a member of the Association under the articles of association.

For the fulfilment of actions prescribed under the articles of association, I authorise Võrumaa Metsaühistu MTÜ to store, collect and process my personal and forestry data in the relevant registers (incl Metsaregister) and information systems.

Send the completed application to Võrumaa Metsaühistu MTÜ, Pikk 4, 65604 Võru.

SIGNATURE	
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DATE

To be completed by the Forest Association

ADOPTED ON (DATE)